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r Initials*		Number Kind Code <sup>2</sup> (If known)						of Cited Document MM-DD-YYYY		Where Relevant Passages or Relevant Figures Appear		
Jen		3,87	7,919			Shorr		04-1	5-1975			_
		4,06	4,065,841					01-0	3-1978	••••••	••••••	*************************
		4,36	8,568			Watanabe		01-1	8-1983			
		4,70	5,711			Perna		10-1	0-1987			
	4,903,597				Hoage et al.		02-2	2-27-1990		••••••••••••••••••••••••••••••••••••••		
<b> </b>	ļ	4,92	5,014			Haite		05-1	5-1990		***************************************	
		5,71	3,408			Morando		02-0	3-1998		*************	*************
	<u> </u>		7,950			Hycner		• • • • • • • • • • • • • • • • • • • •	2-1999			***************************************
<b></b>	ļ	••••	5,689			Gajewski		•••••	0-1999		• • • • • • • • • • • • • • • • • • • •	
ļ	ļ	•••••	5,957			Ichno et al.		• • • • • • • • •	1-2000		••••••	•••••
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xir	ļ		3,671			Kayser		• • • • • • • • • • • • • • • • • • • •	3-2001	•••••		••••••
XOV	}	0,40	6,784			Cerrah		06-1	8-2002		***************************************	
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						***************************************	•••••••••••••••••••••••••••••••••••••••	•••••		•••••	••••••	•••••
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SUR		wo	95/33143	A1	Kuosi	manen et al.	12-07-	12-07-1995				
5U1		wo	00/586/38	A1	Metso	Paper Inc.	10-05-	0-05-2000		1		
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				First Named Inventor	Eero Savolainen		
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		NON PATENT LITERATURE DOCUMENTS	
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1	***********	National Board of Patents and Registration Official Action of Approval dated April 25, 2000, with translation.	ļ
	••••••	National Board of Patents and Registration Office Communication dated July 4, 2000, with translation.	
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